

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MAINE

U.S. DISTRICT COURT
DISTRICT OF MAINE
RECEIVED & FILED

2024 MAY 28 P 3:04

William John Randall

Complaint for a Civil Case

Civil No. _____

(to be filled in by the Clerk's Office)

Jury Trial: ☒ Yes ☐ No
(check one)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-against-

Kennebec Behavior Health of Waterville
Social Security Administration
Penobscot Community Health and Counseling

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

I. The Parties to This Complaint**A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	<u>William John Crandan</u>
Street Address	<u>3 Marsh LANE AP1</u>
City and County	<u>Orono Penobscot</u>
State and Zip Code	<u>Maine 04473</u>
Telephone Number	<u>207 694 9235</u>
E-mail Address	<u>bulldogger1084@gmail.com</u>

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	<u>Kennebec Behavioral Health Marina</u>
Job or Title (if known)	<u>Representative Payee</u>
Street Address	<u>67 Elston Parkway</u>
City and County	<u>Waterville Kennebec</u>
State and Zip Code	<u>Maine 04901</u>
Telephone Number	<u></u>
E-mail Address (if known)	<u></u>

Defendant No. 2

Name	<u>Social Security Administration</u>
Job or Title (if known)	<u></u>
Street Address	<u>65 Harbor Street</u>
City and County	<u>Bangor, ME 04401 Penobscot</u>

State and Zip Code

Maine 04401

Telephone Number

879 405 1448

E-mail Address

(if known)

Defendant No. 3

Name

Penobscot Community Health and Counseling

Job or Title

(if known)

Street Address

1012 Union St

City and County

Bangor Penobscot

State and Zip Code

ME 04401

Telephone Number

207 404 8100

E-mail Address

(if known)

Defendant No. 4

Name

Job or Title

(if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address

(if known)

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (*check all that apply*)



Federal question



Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

Title 26 & 650-A Penalties

Chapter 7 689 Wages and Payments

B. If the Basis for Jurisdiction Is Diversity of Citizenship

1. The Plaintiff(s)

a. If the plaintiff is an individual

The plaintiff, (*name*) _____, is a citizen of the State of (*name*) _____.

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

2. The Defendant(s)

a. If the defendant is an individual

The defendant, (*name*) _____, is a citizen of the State of (*name*) _____. Or is a citizen of (*foreign nation*) _____.

b. If the defendant is a corporation

The defendant, (name) _____, is incorporated under the laws of the State of (name) _____, and has its principal place of business in the State of (name) _____. Or is incorporated under the laws of (foreign nation) _____, and has its principal place of business in (name) _____.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy—the amount the plaintiff claims the defendant owes or the amount at stake—is more than \$75,000, not counting interest and costs of court, because *(explain)*:

I am suing for \$8.1 Billion lost wages
over the next 5 years due to restrictions
placed by defendants on my manufacturing,
publishing and Insurance Business losses.

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

.... I have Been restricted by the defendants from earning income from the manufacturing of my medical invention, publication of my 11 childrens books and lost income from my Insurance Business projected market value next 5 years \$8.1 Billion. The defendants have cost me state regulatory fines.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

5 year market projected losses totaling \$ 8.1 Billion dollars.

V. Closing

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: May 22, 2024

Signature of Plaintiff



Printed Name of Plaintiff

William J. Crandall